



BOROUGH OF HARWICH

ANNUAL REPORT

for 1948

of the

Medical Officer of Health
and Sanitary Inspector

BOROUGH OF HARWICH

HEALTH DEPARTMENT OFFICERS (As at 31st December, 1948)

Medical Officer of Health:

J. ROLAND HETHERINGTON
L.R.C.P. and S.E., L.R.F.P. and S.G., D.P.H.

Deputy Medical Officer of Health (part-time):

KIERAN PHELAN, M.B., B.Ch., B.A.O.

Sanitary Inspector:

A. E. PRICE, Cert. R.S.I. and S.I.J.E.B.

Clerical Staff:

S. J. ROSE
Mrs. M. W. BIGGS

PUBLIC HEALTH COMMITTEE (As from 18th May, 1949)

Chairman: Councillor F. H. Sewell

Aldermen J. E. Cann, J.P. and R. A. Ward

Councillors Mrs. H. W. Brennan, Mrs. E. M. Smith, W. H. Feakes,
R. Fuller

ANNUAL REPORT OF THE
MEDICAL OFFICER OF HEALTH
FOR THE YEAR 1948

TO THE MAYOR, ALDERMEN AND COUNCILLORS OF THE
BOROUGH OF HARWICH

Mr. Mayor, Ladies and Gentlemen,

I have the honour to present the Annual Report for the year 1948. This is drawn up in accordance with Ministry of Health Circular 3/49.

The outstanding feature of the year has been the National Health Service Act which came into operation on the 5th July. Under this Act certain of the services which had hitherto been the responsibility of the Local Authority were transferred to the County Council acting as the newly constituted Local Health Authority, while certain services which had previously been administered by the County Council were transferred to the newly constituted North East Metropolitan Regional Hospital Board.

Mention should be made particularly of the Maternity and Child Welfare Service which has been the responsibility of the Borough Council for more than 30 years.

The Notification of Births Act, 1915, made compulsory the notification of all births, the aim being to provide the Local Authority with the necessary data on which to build up a scheme for the promotion of child health and prevention of infantile mortality. In Harwich no action was taken until the appointment of the first Health Visitor. In connection with this appointment the report of the Medical Officer of Health to the G.P. Committee in July, 1916, is of interest:—

“A report from the Medical Officer of Health was received and read in which he recommended:—

1. The appointment of a Health Visitor for the systematic visiting of Mothers and their Babies.
2. The assistance at confinements of necessitous Mothers in difficulties of labour and puerperal abnormalities.
3. The visiting of children under School age.
4. The holding of a weekly clinic for giving advice to ante- or post-natal mothers—also for general advice about Babies.
5. The provision of a room suitably equipped for difficult labours and for the treatment of necessitous cases in which the home surroundings endanger the life of the Mother or Child.

6. That (as the visits to the children should be continued up to school age when they become the subject of School Medical Inspection) the School Clinic and the Baby Clinic should be run in conjunction and that the School Nurse should take charge of both Departments and that a second Nurse be appointed to assist (both Nurses doing School and Maternity and Child Welfare work).

7. With regard to assistance at confinements of necessitous mothers in puerperal abnormalities a Scale of Fees should be agreed."

In May, 1917, (nearly a year following the meeting above referred to) the first Health Visitor was appointed and she commenced duty on the 1st September, 1917. The "suggestions" for the guidance of the Health Visitor make interesting reading:—

1. Patent foods, Milk and clothing for necessitous patients cannot be provided out of the rates though drugs, cod liver oil, etc., may be.

2. It is futile ordering patent foods for a baby who cannot be breast fed and whom cow's milk does not suit if the parents are unable to buy the food.

3. To keep the Register of Births under the Notification of Births Act.

4. To visit mothers and newly born babies as directed by the M.O.H. The visits to commence after the Doctor or Midwife has ceased to attend, unless otherwise requested by the Doctor or Midwife attending. And that the other Medical Practitioners in the Borough be invited to notify the Medical Officer of Health of any cases where in their opinion the services of the Health Visitor may be usefully employed.

5. To make house to house visits and re-visits in poor districts with a view:

- (a) To general inspection of premises as to cleanliness of floors, bedding, walls, etc.
- (b) Observation of sanitary defects.
- (c) Observation of methods of collection and disposal of refuse.
- (d) Overcrowding and ventilation.
- (e) General supervision of family with regard to health and habits of parents, cleanliness and clothing of children, presence of vermin, sleeping accommodation, food, protection from fire, provision and storage of suitable food.

(f) To the attention of health and feeding of all Infants and children up to the time they reach school age.

6. To visit all cases of children suffering from measles, whooping cough, ophthalmia neonatorum, diarrhoea and tuberculosis when directed to do so by the M.O.H. To give advice and to distribute leaflets when necessary, or advise a Doctor being sent for.

7. Ante-Natal Visits. To get into touch as far as possible with women about to have babies and give advice as to the many troubles and dangers of pregnancy. This is most important having regard to the large number of stillbirths in England.

These suggestions reveal great foresight, both as regards the important problems of overcrowding, food storage, family health and habits, etc. which were to come up for consideration many years later; and also the means for tackling such problems by considering the family as a unit—a fact which even now is just beginning to be realised in Public Health work.

Following the appointment of the Health Visitor a Maternity and Child Welfare Committee was set up comprising seven members. It is worthy of note that Alderman J. E. Cann was Chairman of this Committee from its inception until its demise, and that Miss Durrant has also served as a co-opted member throughout the same period.

One of the aims of the Committee was to establish a suitable Infant Welfare Centre. Numerous difficulties were encountered and mastered, and nearly three years was to elapse before a centre became possible. In the interval an inestimable amount of good was achieved by the home visits made by the Health Visitor. Our admiration and homage must go out to those who worked with such perseverance and far sightedness—one might say doing the job almost without the tools!

October 21st, 1920, must have been a red letter day for on that day the Centre was opened in West Street. Lamentably inadequate both as to size and convenience, it was the humble beginning of our Welfare Centres in the Borough.

In 1924 the appointment of a Specialist Medical Officer was made and an Ante-Natal Clinic established, three years later an arrangement was entered into whereby pre-school children could receive orthopaedic treatment. Some years later dental inspection and treatment was made available for all pre-school children, and for expectant and nursing mothers.

In 1942, as a result of war damage, new premises were found to be necessary and "Tower House" was opened as a Clinic in November of that year. Finally, the general movement of the

population in a westward direction rendered the provision of a Clinic in Dovercourt desirable and facilities were provided in October, 1946, by the opening of a Clinic held weekly in All Saints' Church Hall. The following statistics may be of interest:—

	HOME VISITS		No. of visits	I.W. CENTRES		ANTE-NATAL CLINIC	
	No. of Births	Babies visited		No. attending	No. of attendances	Exp. mothers	No. of attendances
1917	303	231	716	—	—	—	—
1927	223	N.R.	1867	N.R.	1035	33	41
1937	200	201	1408	95	1525	34	123
1948	243	224	984	753	3793	141	428

Statistics however reveal only part of the work of the service, for no statistics can possibly measure the influence and help given to the young mother desirous of help in the care and training of her infant, to the expectant mother with her particular problems, and to the housewife with the numerous "little troubles of the everyday" (troubles due in many cases to present housing conditions)—to all these the Health Visitor has been a counsellor and guide.

The work of a Health Department is not only to take all practicable steps to prevent the spread of disease, but to seek to promote in every possible way healthy living—what is today known as Positive Health. Foremost of the team for reaching this goal is the Health Visitor who is in continuous contact with the mothers, infants and children of impressionable years.

Highly as one values the work of the Health Visitor on the "district" her work in the Clinic would have been greatly hampered and indeed often quite impossible had it not been for the inestimable help given by the Voluntary Workers! Week by week throughout the years, their work has been ungrudgingly given—work often unseen, seldom appreciated and always "unsung". As we draw to the close of the life of the **Harwich** M. and C.W. Service let us pay tribute to all those who, out of sheer love of little children have helped to maintain the Clinic facilities.

The ambulance service has also been transferred to the Local Health Authority. It would appear that ambulance facilities have been available to the general public for nearly 30 years; during that time many hundreds of journeys have been made and a countless number of grateful patients have doubtless blessed those who had the foresight to provide such an amenity.

Prior to the commencement of the Second World War the ambulance was maintained and serviced by the British Red Cross Society; during hostilities the vehicle was manned by Civil Defence personnel. In 1945 the Council purchased the vehicle and the service since then has been maintained by three full-time drivers. The duties of attendant when required, have been undertaken by a voluntary helper. The services of these helpers, frequently called upon at inconvenient times and nearly always at very short notice, is greatly appreciated. In the past seven years the ambulance has travelled over 33,000 miles making over 2,000 journeys including nearly 300 maternity cases.

With reference to the duties remaining to the Health Department of the Borough one of the most important is that connected with Housing, and your attention is respectfully directed to the remarks in Section D. of this Report.

In presenting this Report it again gives me much pleasure to express my thanks for the helpful co-operation of the various officials of the Council and also the continued loyal support of the members of this Department.

I am,

Your obedient servant,

J. ROLAND HETHERINGTON,

Medical Officer of Health.

Health Department,
Main Road,
Dovercourt.

October, 1949.

ANNUAL REPORT, 1948

SECTION A

STATISTICS AND SOCIAL CONDITIONS OF THE AREA

The area of the Borough is 1,512 acres.

The Population (Census 1931) was 12,700.

Registrar General's Estimated Population (Mid-1948) 12,570.
Rateable Value, £83,394.

The sum represented by a Penny Rate, £312 0s. 0d.

The Borough of Harwich, which includes Dovercourt has a long history. The first recorded Charter was granted by Edward II in 1318, and since that time several other Charters have been granted.

That the main activities of the town should be associated with the sea is an obvious result of the geographical situation on one of the best natural harbours on the East Coast. It may sound somewhat of an irony to say that Harwich is engaged in shipping while the greater part of the shipping facilities are outside the Borough—at Parkeston Quay in the adjoining Tendring Rural District. It is still true however, that the chief occupation of the inhabitants of the Borough is in connection with the steamer services operating between the Port of Harwich and various places on the western sea-board of the Continent. In addition to those men in the employ of British Railways, there are a considerable number associated with Immigration, and Customs and Excise duties.

Others are engaged with Trinity House, both in the manning of the lightships round the coast and also in the Pilotage Service.

The factories in the Borough include one extensive clothing factory, a die casting factory and steam laundry. There are also twenty three smaller registered factories, with an average of less than twelve employees each.

For many years Dovercourt has enjoyed increasing popularity as a seaside resort, and the Corporation have gone to considerable expense to improve the natural attractiveness of Dovercourt Bay. Situated some 70 miles from London, Dovercourt has an unusually good sunshine record—frequently the best on the East Coast, and in 1935 the highest sunshine figures in the country. The air is bracing, and visitors have been heard to comment on the cleanliness of the town.

In common with other parts of the country the Housing Conditions make future development of the Borough somewhat difficult.

During the year under review there has been a further increase in population, which now closely approximates that of the pre-war years. Any further material increase is unlikely until some easing in the present shortage of housing accommodation has been effected.

I. BIRTH RATE

	M.	F.	Total
Live births, legitimate	116	108	224
„ „ illegitimate	6	4	10
Total live births	122	112	234
Birth rate per 1,000 estimated population	18.7		
Still births	2	4	6
Still birth rate per 1,000 births ...	25.0		

From Table VI it will be noted that the birth rate is lower than at any time since 1940. This is in keeping with the position in the Country as a whole. The birth rate for Harwich is still consistently higher than that for England and Wales or for Essex County (see Table V).

2. INFANT MORTALITY

	M.	F.	Total
Deaths of infants under one year ...	7	4	11
Death rate of all infants under one year per 1,000 live births	47.0		
Death rate of legitimate infants under one year per 1,000 live legitimate births	44.6		
Death rate of illegitimate infants under one year per 1,000 live illegitimate births	100		

TABLE I
INFANTILE MORTALITY, 1948

Cause of Death	Did not Survive one week	Lived over one week but less than four weeks	Survived one month, died under one year	Total
Prematurity ...	3	—	—	3
Birth injuries...	—	—	—	—
Malformation...	2	—	2	4
Bronchitis and Pneumonia ...	—	—	2	2
Gastro-Enteritis	—	—	1	1
Other Causes...	—	—	1	1
	5	—	6	11

STILL BIRTHS AND INFANTILE DEATHS

During the year 6 Still Births and 11 Infantile deaths were reported. It is essential that these should be considered together as the causative factors are closely related. The ages at death together with the causes of death are indicated in Table I.

Out of 240 pregnancies no less than 17 terminated in a child which was either still born or died within the first year of life. To this should be added the number of miscarriages, a figure as to which we have no accurate information. In a considerable proportion of these it would appear that there was little if any ante natal supervision, and the value of expectant mothers placing themselves as early as possible under the care of the Midwife or General Practitioner or attending an Ante Natal Clinic cannot be too strongly stressed. While the National Health Service Act provides for a more extended ante natal supervision it is open to question whether the number of examinations required under the Act is frequently too few to adequately benefit the expectant mother. The value of radiological examination and of blood grouping etc. has been firmly established and it is a matter for regret that a large number of confinements are undertaken without any such investigation.

DEATH RATE

	M.	F.	Total
Deaths during year	78	61	139
Crude death rate per 1,000 estimated population	10.1		

The death rate for the year is the lowest recorded since 1934

and while less than for the rate for England and Wales in higher than for the administrative County.

TABLE II

CAUSES OF DEATH					M.	F.	Total
1	Typhoid and Paratyphoid Fevers	...			0	0	0
2	Cerebro-Spinal Fever	...	...	...	0	0	0
3	Scarlet Fever	...	...	...	0	0	0
4	Whooping Cough	...	...	...	0	0	0
5	Diphtheria	...	...	...	0	0	0
6	Tuberculosis of Respiratory System	...			0	1	1
7	Other forms of Tuberculosis	...	...		0	0	0
8	Syphilitic Diseases	...	...	...	1	0	1
9	Measles	...	...	...	0	1	1
10	Influenza	...	...	...	0	0	0
11	Acute Poliomyelitis and Polioencephalitis				0	0	0
12	Acute In-Encephalitis	...	...	...	0	0	0
13	Cancer of Buccal Cavities and Oesophagus						
	Uterus	...	...	...	0	0	0
14	Cancer of Stomach and Duodenum	...			3	0	3
15	Cancer of Breast	...	...	...	0	6	6
16	Cancer of all other sites	...	...	...	7	7	14
17	Diabetes	...	...	...	1	0	1
18	Intracranial Vascular Lesions	...	...		8	10	18
19	Heart Diseases	...	...	...	24	18	42
20	Other Diseases of Circulatory System	...			2	1	3
21	Bronchitis	...	...	...	9	2	11
22	Pneumonia	...	...	...	3	2	5
23	Other Respiratory Diseases	...	...		0	2	2
24	Ulcer of Stomach or Duodenum	...			2	1	3
25	Diarrhoea under 2 years	...	...	...	1	0	1
26	Appendicitis	...	...	...	0	0	0
27	Other Digestive Diseases	...	...	...	1	1	2
28	Nephritis	...	...	...	4	2	6
29	Puerperal and Post Abortional Sepsis	...			0	0	0
30	Other Maternal Causes	...	...	...	0	0	0
31	Premature Birth	...	...	...	1	1	2
32	Congenital Malformation, Birth Injuries						
	and Infantile Diseases	...	...		2	4	6
33	Suicide	...	...	...	0	0	0
34	Road Traffic Accidents	...	...	...	1	0	1
35	Other Violent Causes	...	...	...	1	0	1
36	All other causes	...	...	...	7	2	9
					78	61	139

The principal causes of death during the year were:—

Diseases of Heart and Circulation	...	...	...	63
Diseases of Respiratory System (including Pneumonia in infants, but excluding Tuberculosis)	...	...	...	18
Cancer (all forms)	...	...	...	23
Tuberculosis	...	...	...	1

These groups together account for more than three quarters of all the deaths in the Borough.

TABLE III

PRINCIPAL DIFFERENTIAL CAUSES OF DEATH FOR THE QUINQUENNIAL PERIODS OF 1934-38 and 1944-48

Year	Heart and Circulation	Respiratory System	Cancer (All forms)	Tuberculosis (All forms)
1934	47	11	22	5.8
1935				
1936				
1937				
1938				
1944	54.4	14.6	19	5
1945				
1946				
1947				
1948				

Table III shows the principal differential causes of death for the quinquennial periods of 1934-38 and 1944-48. It is of interest to note that there is a marked increase in the number of deaths from diseases of the Heart and Circulation and of the Respiratory System. There is a gratifying decrease in the number of deaths from cancer and tuberculosis.

TABLE IV

DEATHS AT VARIOUS AGES DURING 1948

Under 1 year ...	...	...	...	...	...	11
1 and under 2	...	...	...	...	...	0
2 and under 5	...	...	...	...	...	1
5 and under 15	...	...	...	...	...	2
15 and under 25	...	...	...	...	...	1
25 and under 35	...	...	...	...	...	3
35 and under 45	...	...	...	...	...	6
45 and under 55	...	...	...	...	...	8
55 and under 65	...	...	...	...	...	22
65 and under 75	...	...	...	...	...	39
75 and upwards	.....	...	...	...	...	46
						139

More than 61% of the deaths in the Borough were of persons aged 65 or over, and 33% were more than 75 years of age. Twenty had attained the aged of 80 and one lived to be a nonagenarian, and one attained the age of 100 years.

TABLE V

VITAL STATISTICS (1947 and 1948)

	England and Wales		Essex		Harwich	
	1947	1948	1947	1948	1947	1948
Birth Rate (a) ...	20.5	17.9	21.2	17.4	24.2	18.7
Death Rate (a) ...	12.0	10.8	10.7	9.4	12.88	10.1
I.M. Rate (b) ...	41.0	34.0	28.0	25.1	28.0	47.0
Whooping Cough (c) .	0.02	0.02	0.15	0.016	0.00	0.00
Diphtheria (c) ...	0.01	0.00	.005	0.003	0.00	0.00
Measles (c) ...	0.01	0.00	.008	0.006	0.00	0.07
Enteritis and Diarrhoea under 2 years of age (b) ...	5.8	3.3	1.78	1.50	3.5	4.2

(a)—Per 1,000 total population

(b)—Per 1,000 live births

(c)—Per 1,000 civilian population

TABLE VI

VITAL STATISTICS FOR 1947 AND CERTAIN PREVIOUS YEARS

Year	Birth Rate	Death Rate	Infant Mortality Rate
1910	27.2	10.1	80
1915	23.4	12.3	108
1920	31.1	11.6	81
1925	20.2	10.6	50
1930	16.9	10.3	48.5
1935	16.4	10.1	47.8
1937	14.81	11.79	31.9
1938	15.51	11.49	35.3
1939	15.51	12.80	20.51
1940	15.26	12.67	42.45
1941	20.39	13.93	60.24
1942	21.38	12.39	36.31
1943	18.99	13.07	39.11
1944	28.7	11.72	52.43
1945	21.78	12.45	36.86
1946	23.64	12.89	52.6
1947	24.2	12.88	28.0
1948	18.7	10.1	47.0

SECTION B

**GENERAL PROVISION OF HEALTH SERVICES
FOR THE AREA**

(a) Staffing

(i) The Medical Officer of Health holds the following appointments, the apportionment of duties being as indicated:—

BOROUGH OF HARWICH

Medical Officer of Health	... ..	13 per cent.
Maternity & Child Welfare Medical Officer		3 " "
(as from 5th July, 1948, this service transferred to the Essex County Council as Local Health Authority)		

ESSEX COUNTY COUNCIL

Assistant School Medical Officer	...	24 per cent
Assistant V.D. Medical Officer	... ..	10 " "
(as from 5th July, 1948, this service transferred to the North East Metropolitan Hospital Board)		

HARWICH PORT HEALTH AUTHORITY

Medical Officer	... ..	4 per cent.
Medical Inspector of Aliens	... ..	46 " "

(ii) *Sanitary Inspector*.—The Sanitary Inspector carries out all the duties imposed by statute, including the inspection of shops. In addition he holds the post of Shop Inspector under the Shops Acts, 1934. He also carries out the necessary duties under the Rat and Mice (Destruction Act), 1919, and is appointed to carry out inspections under the Housing Acts. In co-operation with the Borough Engineer and Surveyor he supervises the Scavenging of the district.

(iii) *Health Visitors*.—Prior to the inauguration of the National Health Service Act, both Health Visitors carried out duties as School Nurses under the Essex Education Authority in addition to their duties in connection with Maternity and Child Welfare. From the 5th July, 1948, the latter duties were taken over by the Essex County Council as Local Health Authority. In addition the Health Visitors attend as necessary at the sessions of the V.D. Clinic.

(b) Laboratory Facilities

All pathological specimens including those connected with V.D. are dealt with at the Laboratory, Essex County Hospital, Colchester, the service being organised under the Hospital Board.

(c) Ambulance Facilities

Up to the 5th July, 1948, the following journeys were undertaken:—

				Maternity	Other	Total
Local	...	...	...	1	216	217
Colchester	...	...	...	22	36	58
Ipswich...	...	...	...	—	10	10
Other destinations	...	...	...	8	1	9
				<hr/> 31	<hr/> 263	<hr/> 294

Total mileage for the period: 3,949.

From the 5th July, 1948, onward, the responsibility of Ambulance Services was transferred to the Essex County Council acting as Local Health Authority.

(d) Hospital Facilities

"The Harwich and District Hospital and Fryatt Memorial" situated at Dovercourt, contains 24 beds and 2 cots, and provides facilities for all general, medical and surgical treatment.

There are no Hospital or Nursing Home facilities in the Borough for Maternity Cases. Patients requiring hospitalisation have to be conveyed to Colchester, involving a journey of some 20 miles. The absence of local facilities is very regrettable and definitely adds to the risk of maternal morbidity and infantile survival.

As from the 5th July, 1948, both the Harwich and District Hospital and the Hospitals in Colchester (as throughout the Country) are transferred to the Hospital Boards.

(e) Nursing in the Home

(1) *District Nurses and Midwives.*—There are three District Nurse Midwives who supply in so far as they are able the needs of the Borough and adjoining township of Parkeston. Prior to the advent of the National Health Service Act, the responsibility of providing an efficient Nursing Service in the Borough was undertaken by the Harwich and District Nursing Association, under the able chairmanship of Mrs. R. A. Ward, J.P.

The time of the Nurses is very fully occupied and there is ample work for at least one additional Nurse.

From the 5th July, 1948, the work so ably carried on for so many years by the Nursing Association was transferred to the Local Health Authority.

(2) *Home Helps.*—This service was expanded in the course of the year and it was frequently most difficult to arrange the services of a home help when required. It is pleasing to be able to report that complaints as to the services provided were very few and generally concerned only minor matters.

In common with other Health Services the Home Help Service was transferred to the Local Health Authority in July. It has been found an advantage for the local administration of the service to be carried out in the Health Department, Main Road, Dovercourt.

Home Helps registered as at the beginning of the year	...	...	...	...	5
Enrolled during the year	...	...	...	...	15
Removed from the register	...	...	...	...	7
On register at the end of the year	...	...	...	...	13
Number of calls for home helps	...	...	...	...	32
(including 14 for maternity cases)					
Number of visits by Health Visitors in connection with this service	...	...	...	...	189

(f) Clinics and Treatment Centres (as on 31st December, 1948)

- (1) *Maternity and Child Welfare (Local Health Authority)*
 - (a) Ante-Natal and Post-Natal Clinics at "Tower House", 38, Main Road, Harwich, on Thursdays at 2 p.m.
 - (b) Infant and Toddler Clinic
 - (i) All Saints' Church Hall, Monday, at 2 p.m.
 - (ii) Tower House, Main Road, Harwich, Tuesday, at 2 p.m.
- (2) *Diphtheria Immunisation (Local Health Authority)*
Facilities for this are available at the Infant and Toddler Clinics.
- (3) *School Medical Service (Essex Education Committee)*
 - (a) School Clinic at "Tower House", each Tuesday and Friday at 10.0 a.m. Treatment of minor ailments daily at 9.30 a.m.
 - (b) Dental Clinic at "Tower House" daily at 10 a.m. and 2 p.m.
 - (c) Ophthalmic Clinic at "Tower House" by appointment.
 - (d) Orthopaedic Clinic at "Tower House" by appointment.
 - (e) Speech Therapy Clinic at "Tower House" by appointment.
- (4) *Tuberculosis (Regional Hospital Board).*
Health Department, Main Road, Dovercourt.
1st and 3rd Tuesday of each month at 2.30 p.m.
- (5) *Venereal Diseases (Regional Hospital Board)*
Treatment is given at the Health Department on:

Monday	...	...	...	9 a.m. to 10 a.m.
Wednesday	...	...	...	11.30 a.m. to 1 p.m.
Thursday	...	...	...	9 a.m. to 10 a.m.
"	...	...	...	6 p.m. to 7 p.m.
Saturday	...	...	...	9 a.m. to 10 a.m.

 or by appointment

(g) Maternity and Child Welfare

In view of the transfer of maternity and child welfare powers from the Borough to the Local Health on the 5th July, 1948, the statistics following have, where considered relevant, been appropriately divided.

(1) Notification of Births

Number of births notified in the are during the year
(Section 203 of the Public Health Act, 1936):

Live births	...	...	237
Still births	...	...	6
			<hr/>
Total	...	...	243
			<hr/>
By midwives	...	...	159
By doctors	...	...	84

(2) Health Visiting

Number of Health Visitors employed at the end of the year:

- (i) by the Council 2
- (ii) by voluntary associations nil
- (b) Equivalent of whole-time services devoted by the whole staff to health visiting (including attendance at Infant Welfare Centres):
 - (i) in the case of Health Visitors employed by the Council 1
 - (ii) in the case of Health Visitors employed by voluntary associations nil
- (c) Number of visits paid during the year by Health Visitors:

		1.1.48 }	5. 7.48 }	
		4.7.48 }	31.12.48 }	Total
(i) to expectant mothers—				
First Visits	8	10	18	
Total Visits... ..	12	18	30	
(ii) to children under one year of age—				
First Visits	119	105	224	
Total Visits	391	593	984	
(iii) to children between the ages of one and five years—				
Total Visits	885	926	1811	

The Introduction of the National Health Service Act has led to an extension of the duties of the Health Visitor. Although engaged mainly in Infant Welfare and in the supervision of the health of the school child, an increase in proportion of the Health Visitor's time is devoted to visiting the homes of the adult sick.

(3) *Infant Welfare Centres*

(a) Number of Centres provided and maintained by the Council				2
(b) Number of Centres provided and maintained by voluntary associations ...				nil
(c) Total number of attendance at all Centres during the year:				
	1.1.48 }	5. 7.48 }		
	4.7.48 }	31.12.48 }	Total	
(i) by children under one year of age ...	1287	1365		2652
(ii) between the age of one and five years ...	554	587		1141
(d) Total number of children who first attended at the Centres during the year:				
(i) under one year of age .	127	74		201
(ii) between the age of one and five years ...	51	67		118
(e) Total number of children under five years of age who attended at the Centres during the year and who at the end of the year were:				
(i) under one year of age				176
(ii) over one year of age				577
(f) Percentage of notified live births represented by the number in (d) (i)				85.8

The total number of attendances of infants and toddlers at the two Clinics under Local Authority control is:

	1946	1947	1948
Under 12 months ...	2,030	3,596	2,652
Over 12 months ...	638	1,337	1,141
	<hr/> 2,668	<hr/> 4,933	<hr/> 3,793

The decrease shown during the past 12 months is in part due to the lower number of births recorded (from 281 to 237). Furthermore some of the General Practitioners in the area are holding special "Clinic Sessions" for the children born to their patients; statistics on this point are naturally not available. It is however a practice to be commended and one which envisages a service which will in due course be provided in Health Centres.

Attention may be directed to the proportion of infants in the Borough who attend the Infant Welfare Centres. Reviewing the past 15 years it is found that in 1934-38 approximately 37% of the children born in the Borough attended at the Infant Welfare Centre. In the next quinquennium (1939-43) there was an increase to 78%, and during the 5 years ending 1948, the proportion was 83%.

PREMATURE BIRTHS

During the year 17 babies were designated as premature, nine in the first half of the year (i.e. while the Borough was an autonomous Maternity and Child Welfare Authority) and eight after the transfer of these powers to the Local Health Authority. Twelve of the premature babies were born in the Borough, of whom three did not survive four weeks. Five were born outside the Borough, three in Hospital and two in Nursing Homes. Of those born in Hospital, one died at the age of five weeks.

There is close co-operation between the Midwives and Health Visitors and the Home Help Service, so that any domestic emergency can usually be readily handled. Facilities are also available if required for conveyance to Hospital by ambulance fitted with a heated cot.

The remarks relating to the association between inadequate ante-natal care and infantile deaths on page 10 apply equally to premature infants. It is significant that in only a small proportion of those pregnancies which terminated prematurely was there anything approaching adequate ante-natal supervision.

(4) *Ante-Natal and Post-Natal Supervision*

	<i>Ante-Natal</i>	<i>Post-Natal</i>
(a) Ante-natal and Post-natal Clinics (whether held at Infant Welfare Centres or at other Premises): ...	—	—
(i) Number of Clinics provided and maintained by the Council ...	1	1
(ii) Number of Clinics provided and maintained by voluntary associations	—	—
(iii) Total number of attendances at all Clinics during the year	428	6
(iv) Total number of women who attended at the Clinics during the year.	141	3
(b) Total number of expectant mothers ante-natally examined and of cases post-natally examined during the year, under arrangements made by the Council with private medical practitioners, excluding cases under (4)		
(a) (iv)	nil	nil
(c) Percentage of notified births (live and still) represented by the total numbers of women shown under (4) (a) (iv) and (4) (b)	58%	
(d) Number of women (if any) sent by the Council up to the 4th July, 1948, to other maternity institutions	18	

Attendance at the Ante-Natal Clinic continues at reasonably satisfactory level, and there must be few expectant mothers who are not seen at least twice during pregnancy—either at the Clinic or by the Midwives or the general practitioners in the Borough. While two examinations is the number laid down in the National Health Service Scheme, in many cases this is a minimum which is considered to be quite inadequate and one hopes that as the new Health Service develops it will become customary for expectant mothers to receive much more supervision than this bare minimum.

Of the mothers who were sent into Hospital the majority were living in such conditions at home as rendered the undertaking of a confinement a matter of considerable risk to mother and child. With the advent of free hospitalisation it was to be expected there would be an increase in the demand for institutional confinements. The increase however was not as great as might have been anticipated, and in only a small number of cases was it found impossible to arrange admission to hospital.

It has not been found possible to establish a separate Post-natal Clinic, and patients are usually dealt with at the Ante-natal Clinic.

Nor has it been found possible to achieve anything toward the provision of maternity accommodation in the Borough itself. The need for this has become more urgent with the closing of the maternity ward at Heath Hospital, Tendring.

(5) *Supply of Milk and other Foods*

					Tins	
					Packets, etc.	Free
National Dried Milk	Half Cream	...	...	...	163	
"	"	"	Full Cream	...	9,532	
Cow and Gate	...	...	...	...	1,276	1
Ostermilk	...	...	...	...	780	
Trufood	...	...	...	...	840	19
Lactagol	...	...	...	...	383	
Farex	...	...	...	...	389	2
Midlothian Oat Food	...	...	...	...	167	
Glucose D.	...	...	...	...	248	
Cod Liver Oil Emulsion	...	...	...	...	54	
Bemax	...	...	...	...	91	
Ribena...	...	...	...	...	170	
Maltoline with Iron	...	...	...	...	7	
Roboleine	...	...	...	...	23	
Virol	...	...	...	...	249	
Virolax	...	...	...	...	24	
Scott's Baby Cereal	...	...	...	...	185	3
Adexolin Liquid	...	...	...	...	94	
Celin Tablets	...	...	...	...	1,014	
Orange Juice	...	...	...	...	22,679	
Cod Liver Oil	...	...	...	...	5,056	
A. and D. Capsules	...	...	...	...	1,720	

The Milk and other Foods supplied through the Clinic at approximately cost price (or free in necessitous cases) is given in the accompanying list. As might be anticipated by the smaller number of births there has been a slight reduction in the sale of dried milks, while the improved facilities for obtaining "toddler" foods in the retail shops is reflected in the decreased sales at the Clinic.

On the matter of breast feeding it is a matter for regret that the proportion of infants who are entirely breast fed up to the third month is so low. A further unfortunate feature is that in too many cases the mother acting entirely on her own impressions decides that the child is not thriving and consequently without consulting anyone else forthwith introduces artificial feeding. The question arises as to how far such practise is the result of the widespread advertisements of the various brands of dried milk! While many such advertisements state (often in small print) that the particular food advertised is "next best to breast" the result of the advertisement is to produce in the mind of the mother the thought that artificial feeding is better than breast feeding. From a scientific and to a lesser degree from the hygienic point of view, artificial feeding has greatly improved during the past twenty years. Biologically however it is vastly inferior to breast feeding. The benefits of breast feeding—best for baby and for mother, its cheapness and cleanliness have often been repeated, and yet to what poor effect! When children suffer from frequent colds, "glands", and similar complaints how seldom is consideration given to the important matter of the feeding of the first year-of life?

The Food Executive Officer has kindly given me the following statistics of percentage uptake of Welfare Foods:—

	Orange Juice Per cent	Cod Liver Oil Per cent.	A. and D. Tablets Per cent.
13 weeks ended 28.2.48.	... 37.9	33.7	41.7
13 weeks ended 29.5.48	... 42.8	29.2	46.9
13 weeks ended 28.8.48	... 51.6	29.5	64.9
13 weeks ended 27.11.48	... 41.3	33.3	51.2

These are calculated in a somewhat different method from that used in previous years, so that comparison cannot be completely adequate; the inference is however, that the increase reported last year has been steadily maintained.

(6) *Child Life Protection*.—The duties of the Health Visitors acting as Child Life Protection Visitors have now been assumed by the Children's Officer appointed under the Children's Act, 1948, and special visits in connection with this work are no longer necessary. The Children's Act, however did not come into operation until the middle of 1948, and in the initial stages of its operation and until the Children's Department was completely established, much work was undertaken by the Health Visitors. It is gratifying to relate that there is cordial co-operation between officers of the two Departments.

SECTION C

SANITARY CONDITIONS

I. WATER SUPPLY

Water is supplied by the Tendring Hundred Waterworks Company.

Source of Supply:

The whole supply to the Company's district is obtained from wells and boreholes sited at Lawford and Dedham in the upper Chalk formation.

Area of Supply:

The limits of supply cover an area of about 90 square miles and includes the Borough of Harwich, the Urban District of Frinton and Walton, seventeen parishes in the Tendring Rural District and one parish in the Lexden and Winstree District. A bulk supply is afforded to the Clacton Urban District Council and the Tendring Rural District Council under agreement.

The population supplied is about 45,000 persons.

WATER ANALYSIS

Chemical Results in Parts per Million

AVERAGE RESULTS FOR 12 MONTHS, 1948

Lawford Dedham

Turbidity	...	...	...	...	5	Less than 5
Colour	...	...	...	...	Less than 10	Less than 10
Reaction Ph.	...	...	...	...	Neutral 7.3	Neutral 7.7
Chlorine in Chlorides	...	...	...	...	506	191
Electric Conductivity at 20°C.	...	...	...	...	1,970	1,070
Hardness Total	...	...	...	...	427	280
Temporary	...	...	...	...	267	268
Permanent	...	...	...	...	160	12
Nitrogen in Nitrates	...	...	...	...	0.0	0.0
Free Ammonia	...	...	...	...	1.0	0.49
Albuminoid Ammonia	...	...	...	...	0.006	0.001
Oxygen absorbed in 4 hrs. at 27° C.	...	...	...	...	0.28	0.17
Metals. Iron	...	...	...	...	0.24	0.17
Odour	...	...	...	...	Nil	Nil
Free CO ₂	...	...	...	...	17	9
Total Solids dried at 180°C.	...	...	...	...	1,260	714
Alkalinity as Calcium Carbonate	...	...	...	...	267	268
Residual Chlorine	...	...	...	...	0.04	0.21
Nitrogen in Nitrites	...	...	...	...	Less than 0.01	Less than 0.01

Bacteriological Results

Presumptive Coliform	Re-	Present —	Present —
action	...	Absent 100 ml.	Absent 100 ml.
Bact. coli.	...	Present —	Present —
		Absent 100 ml.	Absent 100 ml.
Cl. welchii Reaction	...	Present —	Present —
		Absent 100 ml.	Absent 100 ml.

Remarks

These samples are practically clear and bright in appearance, neutral in reaction, and free from metals apart from a minute trace of iron. The water is hard in character, but not unduly so, and its content of mineral and saline constituents in solutions, although high, is not excessive. Its organic quality and bacterial purity are of the highest standard.

The water is considered pure and wholesome in character, suitable for public supply purposes.

All samples were analysed by the Counties Public Health Laboratories.

II. SEWERAGE AND DRAINAGE

The Borough (except a few low lying parts) is sewered, but owing to the town's growth, it is necessary to provide a new sewerage system and treatment works for the Upper Dovercourt and part of the Lower Dovercourt area. The present treatment works are unsatisfactory and a new scheme has been commenced and steady progress has been made during this year. It would appear that the new works will come into operation early in 1950.

Closest Accommodation

The approximate number is as follows:

Water closets	...	...	...	...	4,904
Pail closets	...	...	...	...	39
Houses with cesspool drainage	...	...	...	...	71

Most closets in the Borough are of the wash-down type, flushed by cisterns. There are still a few hand-flushed closets and if nuisances arise owners are called upon to provide and fix flushing cisterns.

The emptying of cesspools and pail closets is the responsibility of the owners, although the Council arrange for emptying at the expense of and on request of the owners.

III. SCAVENGING

Household refuse is collected once weekly, together with all types of salvage by the Council, by direct labour, and is disposed of by controlled tipping on land to the north of the sea wall at Dovercourt.

Uncontrolled Dumping

For some years past considerable trouble has been experienced due to indiscriminate dumping of waste materials of all description on the numerous areas of undeveloped land throughout the Borough (not always of such materials as to constitute a nuisance as defined by the Public Health Act, but most certainly creating an eyesore). It would appear from observation that this is not peculiar to this Borough but widespread throughout the length and breadth of this country, but what is certain is that such dumping within this Borough is done by the local inhabitants. Seemingly there is a type of person who delights in throwing rubbish on other people's land. There is maintained in the Borough an adequate refuse and disposal service for household and trade refuse, and it should be understood by all residents that if at any time they have more waste materials, old bedsteads, bedding, etc. than can be disposed of in the dustbin, that the Authority will make a special collection of same, the only exception being builder's debris and garden refuse, the latter should be burnt or

composted. Indiscriminate dumping is bad for any town or neighbourhood and especially so in a seaside resort. The Council collect for disposal by controlled tipping.

Salvage

The following is the weight of all salvage collected and sold during the year, and the figures for 1947 are shown for comparison.

		1947					1948				
		Tons	Cwt.	£	s.	d.	Tons	Cwt.	£	s.	d.
Waste Paper	...	50	6½	320	10	3	73	1½	466	3	3
Metals	...	—	—	—	—	—	11	3	46	0	0
Rags and sacking	...	—	14	11	4	0	4	3½	102	18	0
Kitchen Waste	...	19	13	29	8	3	14	15	22	2	6
Bones	...	1	13¼	2	15	2	—	1¼		6	0
		72	6¾	£363	17	8	103	4¼	£637	9	9

It is of interest to note that during the year 1948, there was an increase of 31 tons in the salvage collected, bringing in an increased income of £274 0 0.

This coincides with the award of a 10% bonus to all men engaged on the work and the increased amount of paper in circulation, and it is to be hoped that the figure will be maintained if not improved upon. It will of course be somewhat governed by the fluctuations in the prices of salvageable materials.

IV. (a) DISINFECTION

At the Health Department, Main Road, Dovercourt, there is a disinfecting station fitted with a Thresh Steam Disinfector, which is used for the steam disinfection of bedding and clothing. This apparatus is a modern direct steam disinfector, and is capable of dealing with any steam disinfection that may be required. Steam disinfection was carried out in 38 cases. In the case of infectious diseases the room or rooms occupied by the patient are fumigated by means of formalin, either in the form of spray, or gas, or both, and when necessary the bedding, etc. is removed for steam disinfection.

(b) ERADICATION OF BED BUGS

In the case of bed bugs, the co-operation of the property owner is sought. Skirting architraves, etc. are removed and paper stripped off the walls of the infested room and burnt. The walls, ceilings, and floors are then sprayed with an approved disinfectant which now contain a percentage of D.D.T. and either formalin or sulphur gas released in the room, and the room, hermetically sealed and left for at least twelve hours, the bedding, etc. afterwards being

removed and steam disinfected. The room may have to receive this treatment a second or third time. Treatment was carried out in nine cases.

V. RAT DESTRUCTION

It is the policy in this area to continually attack and destroy the rat population and to this end the Council employ a rat catcher who is available at any time to deal with the rat nuisance. During the year this man trapped 1,135 rats. Poison baits are also used in certain positions and judging by the take of baits, and the decrease in the number of rats seen after the laying of baits, the total number of rats destroyed would appear to be far in excess of the number stated.

WASP NESTS

During the summer 14 wasp nests were destroyed in the Borough.

VI. SANITARY INSPECTION OF THE AREA

Summary of Sanitary Inspector's visits and notices served.

Nature of visits of inspections:				TOTAL VISITS
1	Water supply and wells	...	...	3
2	Drainage	...	...	12
3	Infectious Diseases	...	...	32
4	Miscellaneous housing visits	...	...	289
5	Tenancy applications	...	...	204
6	Verminous premises	...	...	43
7	Rabbit infestation	...	...	4
8	Rat and mice destruction	...	...	37
9	Cowsheds and Dairies	...	...	10
10	Food inspection	...	...	120
11	Bakehouses	...	...	14
12	Factories	...	...	38
Notices served:				
	Informal notices	...	...	35
	Informal notices complied with	...	...	31
	Statutory notices	...	...	—
	Statutory notices complied with	...	...	—

SECTION D

HOUSING

It is of interest to note that since 1946 when erection of houses recommenced in this Borough after the cessation of hostilities, 66 Council Houses have been erected and occupied, and for the two years 1947-48, twenty two houses have been erected and occupied by private persons, making a total of 88 houses erected and occupied.

This small start will no doubt gain impetus as the numerous difficulties in respect to labour, materials and finance are overcome. The need of rehousing for a large proportion of the inhabitants of this Borough is still very acute.

Only those who are in frequent contact with the overcrowded and insanitary conditions under which many people are compelled to live can fully appreciate the absolute necessity of rehousing.

To recondition many of the older properties of the town is a policy which cannot be recommended, except as a short term expedient—it is too costly, the results unsatisfactory, labour and material are diverted from the more permanent task of erecting new houses.

It is however, essential that such houses must be provided at an economic rent. It is estimated that not more than 7% of the family income should normally be spent in rent. If this is exceeded the result is shortage in other things, usually just as essential to the family well-being.

The time is fully ripe for detailed survey of the housing condition of the whole Borough. Many surprising facts may be anticipated.

I must reiterate a point brought forward in my report of 1947 that:—

It should be noted that Section 5, Housing Act, 1936, states that "It is the duty of every local authority to cause an inspection of their district to be made from time to time with a view to ascertaining whether any house therein is unfit for human habitation and for that purpose it shall be the duty of the authority and of every officer of the authority to comply with such regulations".

To enable this work to be done efficiently it is essential that a house to house inspection should be carried out in most areas of the Borough. This is a physical impossibility for one Sanitary Inspector who alone has to cope with day to day complaints, general sanitation, food inspections, salvage, interviews, etc. Consideration should be given to the question of the appointment of an additional Sanitary Inspector. Such systematic inspection would tie up with the general question of housing and would enable this department to obtain an up-to-date picture of the general social, housing and like conditions existing within the Borough.

1. Erection of New Houses

The following table covers the period from the cessation of hostilities.

				1946	1947	1948	
Erected by Council ...				10	39	17	
Erected by Private Enterprise ...				—	12	10	
Total ...				10	51	27	
<hr/>							
II.	1 (a)	Total number of dwelling houses inspected for housing defects, excluding Council Houses and War Damaged Houses (under Public Health or Housing Acts) ...					289
	(b)	Number of inspections made for the purpose...					289
	2 (a)	Number of dwelling houses (including under subhead 1(a) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 ...					Nil
	(b)	Number of inspections made for this purpose ..					Nil
	3	Number of dwelling houses found to be in a state so dangerous or injurious to health, as to be unfit for human habitation ...					1
	4	Number of dwelling houses (exclusive of those referred to under preceding sub-head) found not to be in all respects reasonably fit for human habitation ...					43
III.		Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority of their Officer ...					31
IV.		Action under Statutory Powers:					
	A.	Proceedings under Section 9, 10 and 16 of the Housing Act, 1936:					
		1	Number of dwelling houses in respect of which notices were served requiring repairs ...				Nil
		2	Number of dwelling houses which were rendered fit after service of formal notices ...				Nil
			(a) by owners ...				—
			(b) by Local Authority in default of owners ...				—
	B.	Proceedings under Public Health Acts ...					
	C.	Proceedings under Sections 11 and 13 of the Housing Act, 1936 ...					Nil
	D.	Demolition orders made ...					Nil

SECTION E

INSPECTION AND SUPERVISION OF FOOD

I. MILK SUPPLY

There are five registered cowkeepers in the Borough. In every case the cows are brought in only for milking.

The greater part of the milk consumed within the Borough is imported from outlying areas.

The number of purveyors of milk, registered under the Milk and Dairies Regulations, at 31st December, 1948 was 17

Of the above purveyors of milk, only 8 are now supplying milk by licence from the Ministry of Food.

Frequent visits are made to all cowsheds, milkshops, and the premises are found to be kept in a clean condition.

The supply of milk is of great importance, and I feel that until all dairies, cowsheds, and milk shops are licensed annually and power given to Local Authorities to refuse licences where the premises are not in all respects scrupulously clean, the milk supply will not be beyond reproach.

Three cowkeepers who purvey most of their milk in the Borough supply Accredited Milk under licence from the County Council, and one retailer holds a licence to purvey Accredited Milk, ~~one~~ Tuberculin Tested Milk, and ~~three~~ *one* hold licences for Pasteurised Milk.

II. MEAT INSPECTION

As from February, 1940, all slaughtering came under Government control, and since 10th April, 1942, slaughtering of animals has ceased in the Borough, as all slaughtering for this area is carried out at Colchester.

III. FOOD SHOPS

Frequent inspections are made of all shops, stores, and vehicles where food is stored for sale. These premises are found to be in a clean condition and to comply with the regulations.

IV. FOODSTUFFS CONDEMNED DURING 1948

Wet Fish:

Herrings	...	...	...	...	8 $\frac{3}{4}$ stones
Plaice	...	...	...	...	1 $\frac{1}{2}$ stones
Dog Fish	...	...	...	...	20 $\frac{1}{2}$ stone
Herring Roes	...	...	...	...	4 stones
Skate Wings	...	...	...	...	5 stones
Mackerel	...	...	...	...	17 stones

Dry Fish:

Kippers	...	...	...	...	18 boxes
Haddock, Smoked	...	...	...	...	5 stone

Fresh Meat: English Hindquarters ... 154 lbs.

Tinned Meats:

Corned Mutton	1 tin	...	6 lbs.
Meat Lunch	... 12 tins	...	12 lbs.
Minced Beef Loaf	2 "	...	2 lbs.
Spaghetti Meat	3 "	...	3 lbs.
Luncheon Meat	... 13 "	...	13 lbs.
Corned Beef	... 9 "	...	29 $\frac{1}{2}$ lbs.
Pork	... 1 tin	...	1 lb.
Pork Sausages	... 2 tins	...	3 lbs.
Stewed Beef	... 1 tin	...	1 lb.
Stewed Steak	... 11 tins	...	11 lbs.
Veal Loaf	... ..	...	2 lbs.
Meat Roll	... ..	...	1 lb.
Pork, Danish	... 2 tins	...	8 lbs.
Tongue	... 4 "	...	24 lbs.
Tongue, Lambs'	... 5 "	...	5 lbs.

Tinned Fish:

Pilchards	... 2 tins	...	1 lb. 8 ozs.
Mussels	... 16 "	...	
Mussels, Dutch	... 30 "	...	46 lbs.
Salmon	... 13 "	...	
Crayfish	... 2 "	...	
Cod Roes	... 1 tin	...	1 lb.
Sardines	... 6 "	...	1 lb. 8 ozs.

Milk Tinned

Milk, Full Cream	153 tins	...	114 lbs. 12 ozs.
Evaporated	213 "	...	159 lbs. 2 ozs.

Other Tinned Foods:

Malted Milk Tablets	131 tins	...	
Soup	... 1 tin	...	1 lb.
Tomatoes	... 3 tins	...	4 $\frac{1}{2}$ lbs.
Tomato Juice	... 15 tins	...	15 lbs.
Bacon	... 1 tin	...	1 $\frac{1}{2}$ lbs.
Dried Egg	... 1 "	...	
Parsnips	... 6 tins	...	6 lbs.
Carrots	... 7 "	...	7 lbs.
Mixed Vegetable	1 tin	...	1 lb.
Spaghetti	... 1 "	...	1 lb.
Pate de Foie	... 1 "	...	12 ozs.
Peas	... 68 tins	...	68 lbs.
Peaches	... 8 "	...	12 lbs.
Plums	... 12 "	...	17 lbs.

Grape Fruit	...	6 tins	...	9 lbs.	
Beans	...	9 „	...	9 lbs.	
Beans in Tomato...	...	6 „	...	6 lbs.	
Apricots	...	1 tin	...	1½ lbs.	
Meat Paste	...	1 jar	...		4 ozs.
Fish Paste...	...	2 jars	...		8 ozs.
Pudding	...	1 tin	...	1 lb.	
Beet Root	...	1 „	...	1 lb.	
Anchovies	...	9 tins	...	1 lb.	11 ozs.

Other Foods:

Sweet Corn	...	1 tin	...	1 lb.	
Potatoes (old)	...	...	...	1 cwt.	
Orange Juice	...	1 tin	...	1 lb.	
Pineapple Juice	...	1 tin	...	1 lb.	
Grapes, Greek	...	5 trays	...	35 lbs.	
Cheese	...	...	...	8 lbs.	
Syrup	...	2 tins	...	2 lbs.	
Prunes	...	...	...	32 lbs.	
Eggs, Dried	...	2 pkts.	...		
Fruit, various	...	16 tins	...	24 lbs.	
Fruit Cocktail	...	55 tins	...	55 lbs.	
Marmite	...	1 bottle	...		8 ozs.
Cheese Camembert	...	42 portions	...		
Fruit	...	159 tins	...	238½ lbs.	
Biscuits	...	162 „	...	276 lbs.	
Bread	...	...	...	103 lbs.	
Borbons Whipped Cream	...	...	...	56 lbs.	
Flabs Bran	...	...	...	1 pkt.	
Jams	...	...	...	34 lbs.	
Marmalade	...	...	...	288 lbs.	
Chocolate	...	...	...	18 lbs.	
Pickles, Mixed	...	1 bottle	...	7 lbs.	
Semolina	...	...	...	5 lbs.	
Sago	...	...	...	6 lbs.	
Butter	...	...	...	9½ lbs.	
Margarine	...	...	...	1½ lbs.	
Oats	...	...	...	2 pkts.	
Flour	...	...	...	81 lbs.	
Oranges	...	...	...	105 lbs.	
Tea	...	...	...	62 lbs.	
Mock Turtle	...	1 tin	...	1 lb.	
Brown Danish Pork	...	2 tins	...	8 lbs.	

V. BAKEHOUSES

There are seven bakehouses in operation and frequent visits are made. All are kept in clean condition. All premises have been hot lime-washed at least twice during the year. There are no underground bakehouses in use in the Borough.

VI. FACTORIES ACT

Report on the administration of the Factory and Workshop Act, 1901 and Factories Act, 1937.

Inspection for purposes of provisions as to health, including inspection made by Sanitary Inspector.

<i>Premises</i>				<i>Inspections</i>
Factories with mechanical power	...	...	...	12
Factories without mechanical power	...	...	...	26
Other premises under the Act including works of building and engineering construction	...	...	...	—
Defects found	...	...	...	2

SECTION F

PREVALENCE OF AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES

In general, the year was free from any serious outbreaks of notifiable infectious disease.

The epidemic of measles in the late spring of the year was in general of a mild character with few immediate sequelae. 275 cases were notified with one death. There is reason to believe that this figure does not represent the total number of cases of measles as many parents are still inclined to treat the complaint with little respect and do not seek medical advice. Reference to Table IX would suggest that the complaint is assuming a tri-annual periodicity.

Whooping Cough attained minor epidemic proportions during the early autumn. From the fact that not one of the 42 notified cases terminated fatally, it may be deduced that prophylactic immunisation against whooping cough, (where complete immunity is not produced) is instrumental in lessening the severity of the complaint.

TABLE VII

NOTIFIABLE DISEASES (Other than Tuberculosis) during the year 1948

TOTAL CASES NOTIFIED

DISEASE	AGE IN YEARS									Total	Cases Admitted to Hospital	Deaths
	0-1	1-2	3-4	5-9	10-14	15-24	25-44	45-64	65-			
Scarlet Fever ...	—	1	0	3	—	—	—	—	—	4	1	—
Whooping Cough ...	3	11	10	16	2	—	—	—	—	42	—	—
Acute Poliomyelitis ...	—	—	—	—	—	—	1	—	—	1	—	—
Acute Polio Encephalitis	—	—	—	—	—	—	—	—	—	—	—	—
Measles ...	10	55	75	123	7	3	2	—	—	275	1	1
Diphtheria ...	—	—	—	—	—	—	—	—	—	—	—	—
Acute Pneumonia ...	1	1	—	3	—	—	2	3	—	10	—	5
Dysentery ...	—	—	—	—	—	—	—	—	—	—	—	—
Smallpox ...	—	—	—	—	—	—	—	—	—	—	—	—
Encephalitis Lethargica	—	—	—	—	—	—	—	—	—	—	—	—
Enteric or Typhoid Fever	—	—	—	—	—	—	—	—	—	—	—	—
Paratyphoid Fevers ...	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas ...	—	—	—	—	—	—	—	—	—	—	—	—
Cerebro Spinal Fever	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia ...	—	—	—	—	—	1	1	—	—	2	1	—
Ophthalmia Neonatorum	—	—	—	—	—	—	—	—	—	—	—	—
Infective Jaundice ...	—	—	—	—	—	—	—	1	—	1	—	—
	15	68	85	145	9	4	6	4	—	336	5	6

TABLE VIII

MONTHLY NOTIFICATIONS OF INFECTIOUS DISEASES DURING 1948

DISEASES	JAN.	FEB.	MAR.	APRIL	MAY	JUNE	JULY	AUG.	SEPT.	OCT.	NOV.	DEC.	Total
Scarlet Fever ...	—	1	1	—	—	—	1	—	—	—	1	—	4
Whooping Cough ...	2	—	—	—	—	2	—	5	17	10	6	—	42
Acute Poliomyelitis ...	—	—	—	—	—	—	—	—	—	1	—	—	1
Measles ...	4	6	22	41	83	69	34	15	1	—	—	—	275
Acute Pneumonia ...	—	—	7	3	—	—	—	—	—	—	—	—	10
Dysentery ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Smallpox ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Paratyphoid Fever ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Cerebro Spinal Fever ...	—	—	—	—	1	—	—	—	—	—	—	—	1
Puerperal Pyrexia ...	—	2	—	—	—	—	—	—	—	—	—	—	2
Ophthalmia Neonatorum ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Infective Jaundice ...	—	—	—	—	—	—	—	—	—	—	—	1	1

TABLE IX

INFECTIOUS DISEASES AND TUBERCULOSIS CASES NOTIFIED DURING THE PAST TEN YEARS

(Figures in parenthesis indicate Number of Deaths during each year)

	1939	1940	1941	1942	1943	1944	1945	1946	1947	1948
Scarlet Fever ...	11(0)	4(0)	4(0)	4(0)	12(0)	50(0)	16(0)	17(0)	15(0)	4(0)
Whooping Cough ...	Notifiable	—	126(0)	50(0)	4(0)	27(0)	41(0)	12(0)	13(0)	42(0)
Acute Poliomyelitis ...	—	—	—	—	—	—	—	—	2(0)	1(0)
Acute Polio-Encephalitis ...	—	—	—	—	—	—	—	—	—	—
Measles ...	Notifiable	—	—	—	—	—	—	—	—	—
Diphtheria ...	Notifiable	1(0)	90(0)	156(0)	71(0)	3(0)	266(0)	8(0)	7(0)	275(1)
Acute Pneumonia ...	2(0)	—	—	1(0)	—	1(1)	1(0)	1(0)	—	—
Dysentery ...	7(2)	3(1)	6(1)	6(0)	9(2)	5(0)	7(10)	3(0)	17(2)	10(5)
Smallpox ...	—	—	—	—	—	—	—	—	1(0)	—
Encephalitis Lethargica ...	—	—	—	—	—	—	—	—	—	—
Enteric or Typhoid Fever ...	—	1(0)	1(0)	—	—	—	1(0)	—	1(1)	1...
Paratyphoid Fevers ...	—	—	—	—	—	—	—	—	—	—
Erysipelas ...	3(0)	2(0)	2(0)	2(0)	2(0)	3(0)	5(0)	2(0)	2(0)	—
Cerebro Spinal Fever ...	—	3(0)	—	—	1(1)	—	1(0)	—	3(0)	1(0)
Puerperal Pyrexia, etc. ...	—	1(0)	—	1(0)	—	1(0)	1(0)	—	—	2(0)
Ophthalmia Neonatorum ...	—	—	1(0)	—	—	—	—	1(0)	1(0)	—
Infective Jaundice ...	—	—	—	—	—	6(0)	3(0)	5(0)	—	1(0)
T.B.—Pulmonary ...	11(10)	7(4)	6(3)	4(3)	11(3)	10(8)	9(4)	12(5)	12(6)	6(1)
T.B.—Non-Pulmonary ...	2(1)	1(1)	4(2)	3(0)	2(0)	3(0)	4(1)	3(0)	1(0)	1(0)

TABLE X

DIPHTHERIA IMMUNISATION

I. Primary

I. Under 5 Years

(a) 1.1.48 — 4. 7.48	...	...	...	99
(b) 5.7.48 — 31.12.48:				
By Local Authority	...	...	...	100
By General Practitioners	...	...	...	15
				— 115
				— 214

II. Over 5 Years

(a) 1.1.48 — 4. 7.48	...	...	...	nil
(b) 5.7.48 — 31.12.48:				
Local Authority	...	...	...	nil
General Practitioners	...	...	...	2
				— 2
				— 2
				— 216

II. Reinforcing Injections

Previous to 1st January, 1948	...	...	...	703
(a) 1.1.48 — 4. 7.48	...	...	...	8
(b) 5.7.48 — 31.12.48:				
Local Authority	...	...	...	114
General Practitioners...	...	...	...	nil
				— 122
				— 825

There are no available statistics to indicate the number of children immunised by General Practitioners during the first half of the year.

With the introduction of the National Health Service Act and the transfer of the powers associated with Immunisation campaigns to the County Council, the primary responsibility for inaugurating such campaigns rests with that Authority. Locally Prophylactic Immunisation against Diphtheria has been steadily advocated throughout the year. It is recommended that a course of two injections be given between the age of eight and twelve months, followed by one reinforcing dose at five years, and another at the age of ten.

In the main the response is due to the continuous efforts made by the Health Visitors. It is felt that personal persuasion yields a much better return than other methods of propaganda. The increased Continental traffic through the Port of Harwich renders more than usually necessary the protection of the local community against possible infection from overseas.

During the year 210 children were also inoculated against Whooping Cough.

TABLE XI
TUBERCULOSIS
New Cases and Mortality During 1948

Age			New Cases Notified During Year				Deaths During Year			
			Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
			M.	F.	M.	F.	M.	F.	M.	F.
0—1	...	...	—	—	—	—	—	—	—	—
1—5	...	...	—	—	—	—	—	—	—	—
5—15	...	...	—	1	—	—	—	—	—	—
15—25	...	...	1	1	—	—	—	—	—	—
25—35	...	...	—	3	—	1	—	—	—	—
35—45	...	...	—	—	—	—	—	—	—	—
45—55	...	...	—	—	—	—	—	1	—	—
55—65	...	...	—	—	—	—	—	—	—	—
65 and over	...	...	—	—	—	—	—	—	—	—
Total	...	...	1	5	—	1	—	1	—	—

In spite of the improvement in the death rate from Tuberculosis, as mentioned earlier in the report, the incidence of the complaint is still too high for an area with the natural amenities which this Borough possesses. Unfortunately under recent legislation the Tuberculosis Service is virtually in a watertight compartment with little official liaison with the Local Authority. It is therefore gratifying to record a free exchange of information between the Tuberculosis Medical Officer, the Tuberculosis Visitor and the Local Authority's Officials. Unsatisfactory housing is a prominent feature in cases of Tuberculosis and it is most essential that adequate housing facilities at **AN ECONOMIC RENT** be provided for Tuberculosis cases; otherwise much of the good resulting from Sanatorium or Hospital treatment will be utterly wasted.

APPENDIX

METEOROLOGICAL STATISTICS—1948

The Borough Engineer and Surveyor has kindly supplied the following Meteorological Statistics:—

TABLE XII
SUNSHINE AND RAINFALL, 1925—1948

Year	Sunshine Hours	Rainfall Inches
1925 	1698.5	20.18
1926 	1625.1	20.78
1927 	1551.6	20.57
1928 	1906.8	24.50
1929 	1816.2	22.80
1930 	1726.5	23.65
1931 	1614.3	17.35
1932 	1437.6	19.52
1933 	1908.4	15.67
1934 	1792.0	19.57
1935 	1910.0	24.75
1936 	1617.4	23.39
1937 	1554.1	27.50
1938 	1780.9	27.50
1939 	1773.7	29.92
1940 	1816.5	20.76
1941 	1426.5	22.14
1942 	1631.0	23.70
1943 	1858.5	16.65
1944 	1649.0	22.74
1945 	1584.3	19.77
1946 	1701.9	25.92
1947 	1853.8	19.39
1948 	1750.8	18.67

The coldest days during 1948 were 21st February and 5th March with 32 degrees.

The warmest day during 1948 was 28th July with 81 degrees.

The day with the most sunshine during 1948 was 19th May, with 14.4 hours.

The wettest day during 1948 was 8th September, with .76 inches.

TABLE XIII
TEMPERATURE

Month	MEANS				HIGHEST		LOWEST	
	Dry	Wet	Max.	Min.	Max.	Min.	Max.	Min.
January	42.37	41.5	46.9	37.8	57	48	39	28
February	40.9	39.4	44.7	34.7	55	47	32	22
March	46.28	44.3	50.9	39.6	71	48	32	30
April	51.28	48.3	55.0	42.53	67	52	46	33
May	55.5	52.43	59.6	46.1	69	54	50	35
June... ..	59.97	56.72	64.46	51.46	78	58	57	44
July	62.17	58.8	66.7	53.6	81	64	57	46
August	62.70	59.43	66.93	54.37	73	62	61	48
September	59.6	57.4	64.4	52.0	72	63	56	40
October	52.27	50.27	56.1	46.4	68	55	41	31
November	45.08	44.45	48.7	40.6	60	53	34	27
December	44.5	42.8	47.5	40.6	56	49	37	28

TABLE XIV
BRIGHT SUNSHINE

MONTH	Hours Bright Sunshine	Daily Average	Number of Sunless Days
January	42.4	1.36	13
February	78.2	2.68	5
March	169.7	5.47	3
April	235.5	7.78	1
May	258.3	8.33	3
June	198.2	6.6	—
July	187.1	6.03	3
August	167.8	5.41	2
September	176.5	5.88	—
October	107.9	3.48	5
November	74.1	2.47	10
December	64.1	2.06	5

TABLE XV

RAINFALL

MONTH			TOTAL FALL IN INCHES	GREATEST FALL IN 24 HOURS	DATE
January	...	...	3.20	.59	10th
February	...	...	1.04	.21	6th
March	...	...	0.59	.26	16th
April	...	...	1.35	.43	17th
May	...	...	1.06	.29	1st
June	...	...	2.19	.37	22nd
July	...	...	1.16	.32	16th
August	...	...	2.10	.41	10th
September	...	...	1.68	.76	12th
October	...	...	1.41	.32	17th
November	...	...	1.41	.59	1st
December	...	...	1.48	.46	13th
			18.67	—	—